

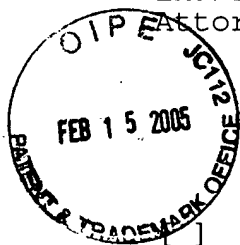
02/16/05

**FEE TRANSMITTAL**

*zw*  
*AT#*

Application Number 10/608,901  
Filing Date June 27, 2003  
Inventor(s) William R. Kennedy, et al.  
Examiner Name Harold Joyce  
Attorney Docket Number KDY 9493

Art Unit 3749  
Confirmation No. 7782



[ X ] Applicant claims small entity status.

**METHOD OF PAYMENT**

[ ] The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

[X] Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

**FEE CALCULATION**

1. [ ] BASIC FILING, SEARCH AND EXAMINATION FEES  
(Type: \_\_\_\_\_) Subtotal (1) \$ \_\_\_\_\_

2. [ ] EXCESS CLAIM FEES

Total Claims \_\_\_\_ - \_\_\_\_ (HP) = \_\_\_\_ x Fee \_\_\_\_ = \$ \_\_\_\_  
Indep Claims \_\_\_\_ - \_\_\_\_ (HP) = \_\_\_\_ x Fee \_\_\_\_ = \$ \_\_\_\_  
Multiple Dependent Claims Fee \$ \_\_\_\_  
(HP = highest number of claims paid for)

Subtotal (2) \$ \_\_\_\_\_

3. [ ] APPLICATION SIZE FEE

Total Pages \_\_\_\_ - 100 = \_\_\_\_ ÷ 50 = \_\_\_\_ x \$250 = \$ \_\_\_\_  
(Application + Drawings) (round up to whole #)

Subtotal (3) \$ \_\_\_\_\_

4. [X] OTHER FEE(S)

[ ] \_\_\_\_\_ month extension of time  
[ ] Information disclosure statement  
[ ] 37 CFR 1.17(q) processing fee  
[ ] Non-English specification  
[X] Notice of Appeal  
[X] Filing a brief in support of appeal  
[ ] Request for oral hearing  
[ ] Other: \_\_\_\_\_

Subtotal (4) \$ 500

**TOTAL AMOUNT OF PAYMENT** \$ 500

*Michael G. Munsell* *2/15/05*  
\_\_\_\_\_  
Michael G. Munsell, Reg. No. 43,820 Date  
Telephone: 314-231-5400

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